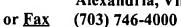
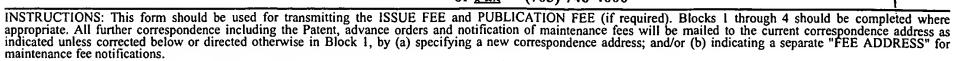
## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

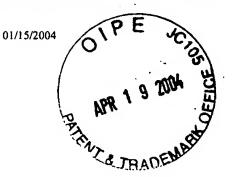




CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

Eric A. LaMorte P.O. Box 434 Yardley, PA 19067-8434

7590



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

	ransmitted to the OSI 10, on the date indicated below.
(Depositor's name	Enic LAMonte
(Signature)	166
(Date	4-15-04

APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/086,251 03/01/2002 Michael McCook SURGEX-1 4075

TITLE OF INVENTION: SYSTEM AND METHOD FOR FILTERING MULTIPLE ADVERSE CHARACTERISTICS FROM A POWER SUPPLY SOURCE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional YES		\$665		\$300	\$965	04/15/2004
EXA	MINER	ART UN	IT	CLASS-SUBCLASS	7	
NGO, I	HUNG V	2831		. 361-111000	_	
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>		names of agents Of firm (hav agent) an attorneys	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.		ORTE & ASSOCIA	
PLEASE NOTE: Unless	O RESIDENCE DATA TO BE s an assignee is identified belowed to the USPTO or is being su	w, no assignee da bmitted under sep	ata will appe parate cover.	ar on the natent Inclusion of	T a substitute for filing an as	iate when an assignment has signment.

Please check the appropriate assignee category or cate 4a. The following fee(s) are enclosed:	4b. Payment of Fee(s):	individual corporation	n or other private group entity	ernmen
ssue Fee		nt of the fee(s) is enclosed.		
Publication Fee		rd. Form PTO-2038 is attache	ed.	
Advance Order - # of Copies	The Director is hereby authorized by charge the red Deposit Account Number (e		required fee(s), or credit any overpayr (enclose an extra copy of this form).	ment, te
(Authorized Signature)	(Date)			
	9-13 01	14/21/2004 HOLTO	7	
NOTE; The Issue Fee and Publication Fee (if requother than the applicant; a registered attorney or interest as shown by the records of the United States.  This collection of information is required by 37 Cobtain or retain a benefit by the public which is to application. Confidentiality is governed by 35 U.S.C.	agent; or the assignee or other party in s Patent and Trademark Office.	04/21/2004 HALI22 01 FC:2501 02 FC:1504	2 00000006 10086251 665.00 OP	

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## FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

Signature

(\$)	995
\ <b>Y</b> /	

Complete if Known		
Application Number	10/086,251	
Filing Date	03/01/2002	
First Named Inventor	McCook	
Examiner Name	H. V. Ngo	
Art Unit	2831	
Attorney Docket No.	Surgex-1	

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)			
Check Credit card Money Other None	one 3. ADDITIONAL FEES			
Deposit Account:	Large Entity Small Entity			
Deposit Account 50-1954		ee Fee Fee Description ode (\$) Fee Paid_		
Account 50-1954 Number	1051 130 2	051 65 Surcharge - late filing fee or oath		
Deposit Account LaMorte & Associates P.C.	1052 50 2	052 25 Surcharge - late provisional filing fee or cover sheet		
Name The Director is authorized to: (check all that apply)	1053 130 1	053 130 Non-English specification		
Charge fee(s) indicated below Credit any overpayments	1812 2,520 1	812 2,520 For filing a request for ex parte reexamination		
Charge any additional fee(s) or any underpayment of fee(s)	1804 920*	1804 920* Requesting publication of SIR prior to		
Charge fee(s) indicated below, except for the filing fee	1805 1,840* 1	805 1,840* Requesting publication of SIR after		
to the above-identified deposit account.		Examiner action		
FEE CALCULATION		2251 55 Extension for reply within first month		
1. BASIC FILING FEE		2252 210 Extension for reply within second month  2253 475 Extension for reply within third month		
Large Entity Small Entity  Fee Fee Fee Fee Description Fee Paid		2253 475 Extension for reply within third month 2254 740 Extension for reply within fourth month		
Code (\$) Code (\$)		2255 1,005 Extension for reply within fifth month		
1001 770   2001 385   Utility filing fee		2401 165 Notice of Appeal		
		2402 165 Filing a brief in support of an appeal		
1003 530 2003 265 Plant filing fee 1004 770 2004 385 Reissue filing fee		2403 145 Request for oral hearing		
1005 160 2005 80 Provisional filing fee	1	451 1,510 Petition to institute a public use proceeding		
	1452 110	2452 55 Petition to revive - unavoidable		
	1453 1,330 2	2453 665 Petition to revive - unintentional		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Fee from	1501 1,330	2501 665 Utility issue fee (or reissue)		
Extra Claims below Fee Paid	1502 480	2502 240 Design issue fee		
Total Claims -20** = X = Independent -3** = X		2503 320 Plant issue fee		
Claims - 3 - 5 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		1460 130 Petitions to the Commissioner		
	1807 50	1807 50 Processing fee under 37 CFR 1.17(q)		
Large Entity   Small Entity Fee Fee   Fee Fee   Fee Description	1806 180	1806 180 Submission of Information Disclosure Stmt		
Code (\$)	8021 40	8021 40 Recording each patent assignment per property (times number of properties)		
1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3	1809 770	2809 385 Filing a submission after final rejection (37 CFR 1.129(a))		
1203 290 2203 145 Multiple dependent claim, if not paid	1810 770	2810 385 For each additional invention to be		
1204 86 2204 43 ** Reissue independent claims		examined (37 CFR 1.129(b))		
over original patent		2801 385 Request for Continued Examination (RCE)		
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802 900	1802 900 Request for expedited examination of a design application		
SUBTOTAL (2) (\$)	Other fee (spec	ify) Pub fee and copies 330		
**or number previously paid, if greater; For Reissues, see above *Reduced by Basic Filing Fee Paid *Reduced by Basic Filing Fee Paid *SUBTOTAL (3) (\$) 995				
SUBMITTED BY (Complete (if applicable))				
Name (Print/Type) Eric A. LaMorte	Registration			

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(Attorney/Agent)